



Pay It Off Agreement

RETURN SIGNED AGREEMENT TO:

OCSS - Pay It Off

PO Box 830, Canal St. Station

New York, NY 10013

See nyc.gov/payitoff for other ways to return.

Date:

Case ID:

Non-Custodial Parent:

Enter your phone/email:

This agreement is between you, _____, and the Human Resources Administration's Office of Child Support Services within the NYC Department of Social Services (NYC DSS). This agreement acknowledges your intent to voluntarily participate in the NYC DSS *Pay It Off* program. As a participant, you agree to pay \$500 or more towards your child support arrears, which are permanently owed to NYC DSS, between June 1, 2023 and June 30, 2023. Your NYC DSS arrears resulted from an order of support from the New York State Family Court and/or Supreme Court that is enforced through the Support Collection Unit.

NYC DSS will accept payments made by mail, telephone, in person, or online. For any non-garnishment payment received from you between June 1, 2023 and June 30, 2023 via certified or personal check, money order, credit card or Visa/MasterCard debit card towards your NYC DSS arrears, totaling \$500 or more, NYC DSS will:

- ☒ Apply your payment (minimum \$500) to your child support account and match it dollar for dollar (up to the amount you owe) to reduce the amount you owe to NYC DSS;
- ☒ If applicable, reduce your permanently assigned NYC DSS child support debt by up to an additional twenty-five hundred dollars (\$2,500) because you have also enrolled in the *Arrears Credit Program*; and
- ☒ If applicable, eliminate the money judgment interest owed to NYC DSS because you paid the judgment principal in full. We will tell you how much interest was removed in writing.

I agree that NYC DSS can apply any overpayment to credit DSS's debt on other child support accounts I may have.

This document contains the entire Agreement between the parties and may not be modified, amended, or rescinded, except in writing signed by or on behalf of the parties.

Payments collected through a garnishment (including paycheck and unemployment insurance garnishments), seizure, tax intercept, or other administrative enforcement tools will not be matched through *Pay It Off*. Payments made under this agreement do not by themselves remove any outstanding warrants. Only a court can remove a warrant.

By signing this Agreement, you understand the requirements you are agreeing to and that the NYC DSS has verified your identity.

Agreements should include a photo or copy of a valid government-issued identification.

Noncustodial Parent

NYC DSS Authorized Representative

Do you have a medical or mental health condition or disability? Does this condition make it hard for you to understand this notice or to do what this notice is asking? Does this condition make it hard for you to get other services at HRA? **We can help you.** Call us at 718-557-1399. You can also ask for help when you visit an HRA office. You have a right to ask for this kind of help under the law.